



**Intermountain
Healthcare**

American Fork Hospital
36 S State Street, Ste 2200
Salt Lake City, UT 84111

Employee Number 13026

Lucinda Ryant

PO Box 952

Lehi UT 84043

Pay Period 26 2009

Beginning 29-NOV-2009 Ending 12-DEC-2009

Tax Information

| | |
|----------------------------|---------|
| Fed W4 Status | Married |
| Fed W4 Allowances | 9 |
| Fed W4 Additional Amount | 0.00 |
| State W4 Status | Married |
| State W4 Allowances | 9 |
| State W4 Additional Amount | 0.00 |

YTD Earnings

| | |
|---------------------------|-----------|
| Gross Wages YTD | 23,008.35 |
| FICA Taxable Wages YTD | 17,581.59 |
| Federal Taxable Wages YTD | 17,238.30 |
| State Taxable Wages YTD | 17,238.30 |

Time Off Accruals

| | |
|---------------------------|-------|
| Paid Time Off Balance | 30.05 |
| Accrued This Pay Period | 7.70 |
| Long Term Illness Balance | 84.25 |

Flexible Spending Available Balances

| | |
|-----------------------------|------|
| Current Year Dependent Care | 0.00 |
| Prior Year Dependent Care | 0.00 |

| Benefits Eligible Hours History | Paid Hours | Pay Periods |
|---------------------------------|------------|-------------|
| Current Quarter | 450.25 | 6 |
| Previous Quarter | 529.75 | 7 |
| 2nd Previous Quarter | 444.75 | 6 |
| 3rd Previous Quarter | 534.32 | 7 |
| Total | 1,959.07 | 26 |

| | |
|-----------------------------------|-------|
| Benefits Eligible Avg. Hours | 75.34 |
| (Total Hours / Total Pay Periods) | |

| | |
|-------------------------|-------|
| Scheduled Working Hours | 80.00 |
|-------------------------|-------|

Statement of Earnings

**Earnings Corrections Must Be
Initiated By Your Supervisor**

| Non-Cash Taxable Earnings | Current Amt | YTD Amount |
|---------------------------|-------------|------------|
| Short-Term Disability | 6.84 | 193.55 |

| Earnings | Current Hrs | Current Amt | YTD Amount |
|-------------------------------|-------------|-------------|------------|
| Extend Clin Shift Prem 50 Pct | 0.00 | 0.00 | 22.80 |
| Funeral | 0.00 | 0.00 | 180.80 |
| Holiday Premium | 0.00 | 0.00 | 24.23 |
| Overtime at Base | 0.00 | 0.00 | 14.22 |
| PTO | 0.00 | 0.00 | 2,210.23 |
| PTO Filler | 0.00 | 0.00 | 313.23 |
| PTO Unscheduled | 0.00 | 0.00 | 546.00 |
| Regular Pay | 76.50 | 872.10 | 18,993.33 |
| Shift Diff Evening | 0.00 | 0.00 | 2.85 |
| Thank You / Recognition | 0.00 | 0.00 | 500.00 |
| Overtime Premium | 0.00 | 0.00 | 7.11 |
| (1) Total Gross Earnings | | 872.10 | |

| Reimbursements | Current Amt | YTD Amount |
|--------------------------|-------------|------------|
| (2) Total Reimbursements | 0.00 | |

| Deductions | Pre-Tax | Current Amt | YTD Amount |
|-------------------------|---------|-------------|------------|
| Medical | . | 79.00 | 1,975.00 |
| Dental | . | 9.63 | 240.75 |
| Basic Life | . | 1.17 | 29.25 |
| Vision | . | 7.93 | 198.25 |
| ADD | . | 3.78 | 94.62 |
| Retirement 401k | . | 0.00 | 343.29 |
| FSA Health Care | . | 111.11 | 2,888.89 |
| FIT | . | 0.00 | 18.97 |
| Medicare EE | . | 9.66 | 254.93 |
| SS EE | . | 41.31 | 1,090.06 |
| SIT-UT | . | 0.00 | 183.94 |
| Child Support | . | 0.00 | 646.16 |
| Garnish | . | 0.00 | 1,277.26 |
| Garnishment 1 | . | 0.00 | 1,321.81 |
| LTD Employee | . | 6.72 | 175.66 |
| Empl Opt Life | . | 3.90 | 97.50 |
| Spouse Dep Life | . | 4.88 | 122.00 |
| Child Dep Life | . | 0.84 | 21.00 |
| 401k Loan A | . | 19.03 | 494.78 |
| 401k Loan B | . | 21.40 | 556.40 |
| 401k Loan C | . | 20.59 | 535.34 |
| Amer Fork Gift Shop | . | 26.48 | 340.30 |
| Basic Life Family | . | 0.28 | 7.00 |
| United Way Contribution | . | 2.00 | 27.00 |
| (3) Total Deductions | | 369.71 | |

| | |
|---------------------|--------|
| NET PAY (1 + 2 - 3) | 502.39 |
|---------------------|--------|

| Disbursements | Amount |
|---------------|--------|
|---------------|--------|